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Malawi

The following provides a summary of specific guidelines from the country's national guidance strategy. Use the jump links in yellow to access details on criteria for starting PEP, evaluation of risk, recommended prophylaxis, and follow-up screening recommendations by patient population. This summary can be downloaded or e-mailed to yourself or a colleague. The original country guidance document can also be downloaded.

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- [Adults, Pregnant Women, and Children](#)
-  [Clinical Management of HIV in Children and Adults - Malawi \(PDF / 8 MB\)](#)

Adults, Pregnant Women, and Children

Year Issued:

2014

Criteria for Starting PEP:

Continue a 30- day course of ARV prophylaxis (PEP) if exposure is classified as "risk" and exposed person is HIV negative.

Eligibility: any exposure classified as risk in the last 72 hours.

Risk:

Substance:

- Blood
- Semen
- Vaginal fluid
- Cerebro
- Spinal fluid
- Pleural fluid
- Amniotic fluid
- Synovial fluid
- Ascites fluid

Evaluation of Risk:

Type of contact:

- Skin penetrated with contaminated needle (hollow or non-hollow)
- Large amount of substance on mucous membrane
- Sexual intercourse no condom
- Risk substance on lacerated skin/ open wound

Source person:

- Regardless of known/unknown HIV status

Recommended Prophylaxis:

Remove infectious substance.

- Wash exposed wounds and skin sites thoroughly with soap.
- Flush mucous membranes with water.
- Do not use bleach, antiseptics or other caustic substances.

Standard <35kg: AZT/3TC

Standard ≥35kg: TDF/3TC

Alternative < 35kg: d4T/3TC

Alternative ≥35kg: AZT/3TC

New HIV test is mandatory to confirm negative HIV status, But: don't delay starting PEP if HTC is not immediately available (no test kits, night, etc.) Do HTC as soon as possible.

Note:

- *PEP is safe in pregnancy and breastfeeding.*
- *Severe anaemia (<8g/dl) is contraindication for AZT/3TC.*
- *Severe renal failure is contraindication TDF/3TC.*

Additional prevention measures after rape/sexual exposure:

- Give emergency contraception (EC) within 72 hours if needed.
- Repeat dose if vomiting occurs within 1 hour of taking EC.
- Explain that next menstrual period should occur before or around the expected time.
- Consider giving presumptive treatment for STIs.

Follow-up Screening Recommendations:

At 30 days (after completing ARV prophylaxis):

- Assess adherence
- Give 60 condoms

At 3 months and 6 months:

- Repeat HTC

In Accordance with WHO 2014 PEP Recommendations?:

N

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